	Cas	se 18-232	L30-GL	T Doc 90 Filed 10/05/	/23 E	Intered 10/05/23 15:29:46	Desc Main
Fill	in this	information	to identify			L of 1	
Debto	or 1	Hilary P.	Sutton, II				
Debto	or 2	First Name		Middle Name Last Name			
		g) Frai Name		Middle Name Last Name			
United	d States			Western District of Ponnsylvania			
Case (# knx	numbe own)	, <u>18-2313</u>	0				
•						 1	
~							
		Form 42	·				
Cer	tifi	cation	About	a Financial Manage	emen	t Course	12/15
if you	are an	individual, y	ou must ta	ke an approved course about perso	nal financ	ial management if:	
■ yo	u filed	for bankrup	cy under c	hapter 7 or 13, or			
_				hapter 11 and § 1141 (d)(3) appiles.			
in a joi	int cas	e, each debt	or must tal	re the course. 11 U.S.C. §§ 727(a)(11) and 132	8(g).	
						ay notify the court that you have comes not notify the court, then Debtor 1 a	
_				is number before your debts will be		· ·	ind Deptor 2 must
-		l under chapie he Bankrupto		need to file this form, file it within 60 day	ys after the	e first date set for the meeting of creditors	under
_		,		-	•	ake the last payment that your plan requ ankruptcy Code, Fed. R. Bankr, P. 1007	
						ment course. To have the requirement	
motion	n with	the court an	d obtain a	court order.	_	·	
Part	1:	Tell the C	ourt Abou	t the Required Course			
Voice	must s	heck one:					
1							
I completed an approved of Date I took the course			pproved co	eurse in personal financial managem	ent:		
			urse	07/16/2023 MM / DD / YYYY			
	Name of approved provider			Dollar Learning Foundation In	ıc.		
	Certificate number			17572-PAW-DE-037594634			
				te a course in personal financial ma ased on (check one):	nagement	t because the court has granted my m	otion for a
		☐ Incapacity. I have a mahout fina		mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions			
				cal disability causes me to be unable to complete a course in personal financial management in person, , or through the internet, even after I reasonably tried to do so.			
:		Active duty.	I am curre	ntly on active military duty in a military	combat zo	ine.	
:		Residence.		listrict in which the United States truste instructional courses cannot adequately		cuptcy administrator) has determined that needs.	at the

Part 2: Sign Here

I certify that the information I have provided is true and correct:

/s/ Hilary P. Sutton, II

Hilary P. Sutton, II

Date 10/04/2023 MM / DD / YYYY

Signature of debtor named on certificate

Printed name of debtor